

Procter & Gamble - I.P. Division**IMPORTANT CONFIDENTIALITY NOTICE**

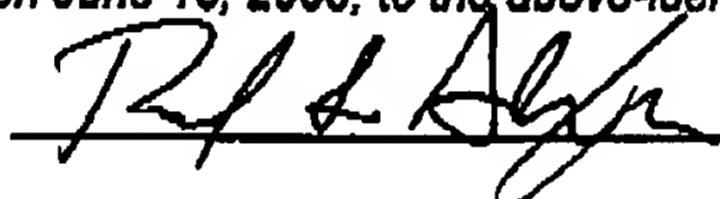
The documents accompanying this teletype transmission contain confidential information belonging to the sender which is legally protected. The information is intended only for the use of the individual or entity named below. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this telemailed information is strictly prohibited. If you have received this teletype in error, please immediately notify us by telephone (collect) to arrange for return of the telemailed document to us.

**FACSIMILE TRANSMITTAL SHEET AND
CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

TO: Examiner Ivars C. Cintins - United States Patent and Trademark Office

Fax No. (703) 872-9311 Phone No. (703) 308-3840

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on June 16, 2003, to the above-identified facsimile number.

 (Signature)

FROM: Richard L. Alexander (Typed or printed name of person signing Certificate)

Fax No. (513) 622-3300 Phone No. (513) 622-1268

Listed below are the item(s) being submitted with this Certificate of Transmission:**

- 1) Response
- 2) Fee Transmittal
- 3) IDS
- 4) PTO Form SB08A
- 5) Patent No. 5,834,114

Number of Pages Including this Page: 26 *26*

DA

Inventor(s): M.D. Mitchell, et al.
S.N.: 09/832,581
Filed: April 11, 2001
Case: 8494

Comments:

**Note: Each paper must have its own certificate of transmission, OR this certificate must identify each submitted paper.

FAX RECEIVED
JUN 17 2003
GROUP 170

**FEE TRANSMITTAL
for FY 2003**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)**1110.00****Complete if Known**

Application Number	09/832,581
Confirmation Number	3612
Filing Date	April 11, 2001
First Named Inventor	M.D. Mitchell
Examiner Name	Ivars C. Cintins
Group/Art Unit	1724

Attorney Docket No. **8494**

METHOD OF PAYMENT (check one)			FEES CALCULATION (continued)																																																																																																		
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payment to: Deposit Account Number 16-2480 Deposit Account Name The Procter & Gamble Company <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17			3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th>Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130 Surcharge-late filing fee or oath</td><td><input type="checkbox"/></td></tr> <tr><td>1052</td><td>50 Surcharge-late provisional filing fee or cover sheet</td><td><input type="checkbox"/></td></tr> <tr><td>1053</td><td>130 Non-English specification</td><td><input type="checkbox"/></td></tr> <tr><td>1812</td><td>2,520 For filing a request for ex parte reexamination</td><td><input type="checkbox"/></td></tr> <tr><td>1804</td><td>920* Requesting publication of SIR prior to Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>1805</td><td>1,840* Requesting publication of SIR after Examiner's action</td><td><input type="checkbox"/></td></tr> <tr><td>1251</td><td>110 Extension for reply within 1st month</td><td><input type="checkbox"/></td></tr> <tr><td>1252</td><td>410 Extension for reply within 2nd month</td><td><input type="checkbox"/></td></tr> <tr><td>1253</td><td>930 Extension for reply within 3rd month</td><td><input type="checkbox"/> [930]</td></tr> <tr><td>1254</td><td>1,450 Extension for reply within 4th month</td><td><input type="checkbox"/></td></tr> <tr><td>1255</td><td>1,970 Extension for reply within 5th month</td><td><input type="checkbox"/></td></tr> <tr><td>1401</td><td>320 Notice of Appeal</td><td><input type="checkbox"/></td></tr> <tr><td>1402</td><td>320 Filing a brief in support of an appeal</td><td><input type="checkbox"/></td></tr> <tr><td>1403</td><td>280 Request for oral hearing</td><td><input type="checkbox"/></td></tr> <tr><td>1451</td><td>1,510 Petition to institute a public use proceeding</td><td><input type="checkbox"/></td></tr> <tr><td>1452</td><td>110 Petition to revive - unavoidable</td><td><input type="checkbox"/></td></tr> <tr><td>1453</td><td>1,300 Petition to revive - unintentional</td><td><input type="checkbox"/></td></tr> <tr><td>1501</td><td>1,300 Utility issue fee (or reissue)</td><td><input type="checkbox"/></td></tr> <tr><td>1502</td><td>470 Design issue fee</td><td><input type="checkbox"/></td></tr> <tr><td>1460</td><td>130 Petitions to the Commissioner</td><td><input type="checkbox"/></td></tr> <tr><td>1807</td><td>50 Petitions related to provisional applications (37 C.F.R. 1.17(q))</td><td><input type="checkbox"/></td></tr> <tr><td>1806</td><td>180 Submission of Information Disclosure Statement</td><td><input type="checkbox"/> [180]</td></tr> <tr><td>1809</td><td>750 Filing a submission after final rejection (37 CFR § 1.129(a))</td><td><input type="checkbox"/></td></tr> <tr><td>1810</td><td>750 For each additional invention to be examined (37 CFR § 1.129(b))</td><td><input type="checkbox"/></td></tr> <tr><td>1801</td><td>750 Request for Continued Examination (RCE)</td><td><input type="checkbox"/></td></tr> <tr><td>1802</td><td>900 Request for expedited examination of a design application</td><td><input type="checkbox"/></td></tr> <tr><td>1454</td><td>1300 Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td><td><input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____ <input type="checkbox"/></td></tr> <tr><td colspan="3">Other fee (specify) _____ <input type="checkbox"/></td></tr> <tr> <td colspan="3">SUBTOTAL (2) (\$)[0]</td> <td colspan="3">* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)[1110]</td> </tr> </tbody> </table>			Code (\$)	Fee Description	Fee Paid	1051	130 Surcharge-late filing fee or oath	<input type="checkbox"/>	1052	50 Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>	1053	130 Non-English specification	<input type="checkbox"/>	1812	2,520 For filing a request for ex parte reexamination	<input type="checkbox"/>	1804	920* Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>	1805	1,840* Requesting publication of SIR after Examiner's action	<input type="checkbox"/>	1251	110 Extension for reply within 1 st month	<input type="checkbox"/>	1252	410 Extension for reply within 2 nd month	<input type="checkbox"/>	1253	930 Extension for reply within 3 rd month	<input type="checkbox"/> [930]	1254	1,450 Extension for reply within 4 th month	<input type="checkbox"/>	1255	1,970 Extension for reply within 5 th month	<input type="checkbox"/>	1401	320 Notice of Appeal	<input type="checkbox"/>	1402	320 Filing a brief in support of an appeal	<input type="checkbox"/>	1403	280 Request for oral hearing	<input type="checkbox"/>	1451	1,510 Petition to institute a public use proceeding	<input type="checkbox"/>	1452	110 Petition to revive - unavoidable	<input type="checkbox"/>	1453	1,300 Petition to revive - unintentional	<input type="checkbox"/>	1501	1,300 Utility issue fee (or reissue)	<input type="checkbox"/>	1502	470 Design issue fee	<input type="checkbox"/>	1460	130 Petitions to the Commissioner	<input type="checkbox"/>	1807	50 Petitions related to provisional applications (37 C.F.R. 1.17(q))	<input type="checkbox"/>	1806	180 Submission of Information Disclosure Statement	<input type="checkbox"/> [180]	1809	750 Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>	1810	750 For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>	1801	750 Request for Continued Examination (RCE)	<input type="checkbox"/>	1802	900 Request for expedited examination of a design application	<input type="checkbox"/>	1454	1300 Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>	Other fee (specify) _____ <input type="checkbox"/>			Other fee (specify) _____ <input type="checkbox"/>			SUBTOTAL (2) (\$) [0]			* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) [1110]		
Code (\$)	Fee Description	Fee Paid																																																																																																			
1051	130 Surcharge-late filing fee or oath	<input type="checkbox"/>																																																																																																			
1052	50 Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>																																																																																																			
1053	130 Non-English specification	<input type="checkbox"/>																																																																																																			
1812	2,520 For filing a request for ex parte reexamination	<input type="checkbox"/>																																																																																																			
1804	920* Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>																																																																																																			
1805	1,840* Requesting publication of SIR after Examiner's action	<input type="checkbox"/>																																																																																																			
1251	110 Extension for reply within 1 st month	<input type="checkbox"/>																																																																																																			
1252	410 Extension for reply within 2 nd month	<input type="checkbox"/>																																																																																																			
1253	930 Extension for reply within 3 rd month	<input type="checkbox"/> [930]																																																																																																			
1254	1,450 Extension for reply within 4 th month	<input type="checkbox"/>																																																																																																			
1255	1,970 Extension for reply within 5 th month	<input type="checkbox"/>																																																																																																			
1401	320 Notice of Appeal	<input type="checkbox"/>																																																																																																			
1402	320 Filing a brief in support of an appeal	<input type="checkbox"/>																																																																																																			
1403	280 Request for oral hearing	<input type="checkbox"/>																																																																																																			
1451	1,510 Petition to institute a public use proceeding	<input type="checkbox"/>																																																																																																			
1452	110 Petition to revive - unavoidable	<input type="checkbox"/>																																																																																																			
1453	1,300 Petition to revive - unintentional	<input type="checkbox"/>																																																																																																			
1501	1,300 Utility issue fee (or reissue)	<input type="checkbox"/>																																																																																																			
1502	470 Design issue fee	<input type="checkbox"/>																																																																																																			
1460	130 Petitions to the Commissioner	<input type="checkbox"/>																																																																																																			
1807	50 Petitions related to provisional applications (37 C.F.R. 1.17(q))	<input type="checkbox"/>																																																																																																			
1806	180 Submission of Information Disclosure Statement	<input type="checkbox"/> [180]																																																																																																			
1809	750 Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>																																																																																																			
1810	750 For each additional invention to be examined (37 CFR § 1.129(b))	<input type="checkbox"/>																																																																																																			
1801	750 Request for Continued Examination (RCE)	<input type="checkbox"/>																																																																																																			
1802	900 Request for expedited examination of a design application	<input type="checkbox"/>																																																																																																			
1454	1300 Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>																																																																																																			
Other fee (specify) _____ <input type="checkbox"/>																																																																																																					
Other fee (specify) _____ <input type="checkbox"/>																																																																																																					
SUBTOTAL (2) (\$) [0]			* Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) [1110]																																																																																																		
1. BASIC FILING FEE - Large Entity <table border="1"> <thead> <tr> <th>Code (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>1001</td><td>750 Utility filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>1002</td><td>330 Design filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>1004</td><td>750 Reissue filing fee</td><td><input type="checkbox"/></td></tr> <tr><td>1005</td><td>160 Provisional filing fee</td><td><input type="checkbox"/></td></tr> </tbody> </table> SUBTOTAL (1) (\$) [0]						Code (\$)	Fee Description	Fee Paid	1001	750 Utility filing fee	<input type="checkbox"/>	1002	330 Design filing fee	<input type="checkbox"/>	1004	750 Reissue filing fee	<input type="checkbox"/>	1005	160 Provisional filing fee	<input type="checkbox"/>																																																																																	
Code (\$)	Fee Description	Fee Paid																																																																																																			
1001	750 Utility filing fee	<input type="checkbox"/>																																																																																																			
1002	330 Design filing fee	<input type="checkbox"/>																																																																																																			
1004	750 Reissue filing fee	<input type="checkbox"/>																																																																																																			
1005	160 Provisional filing fee	<input type="checkbox"/>																																																																																																			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fee from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td><input type="checkbox"/> - 20** =</td> <td><input type="checkbox"/> x</td> <td><input type="checkbox"/> = <input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td><input type="checkbox"/> - 3** =</td> <td><input type="checkbox"/> x</td> <td><input type="checkbox"/> = <input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td><input type="checkbox"/> = <input type="checkbox"/></td> <td></td> </tr> </tbody> </table> ** or number previously paid, if greater; For Reissues, see below <table border="1"> <thead> <tr> <th>Code (\$)</th> <th>Fee Description</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18 Claims in excess of 20</td></tr> <tr><td>1201</td><td>84 Independent claims in excess of 3</td></tr> <tr><td>1203</td><td>280 Multiple dependent claim, if not paid</td></tr> <tr><td>1204</td><td>84 **Reissue independent claims over original patent</td></tr> <tr><td>1205</td><td>18 **Reissue claims in excess of 20 & over original patent</td></tr> </tbody> </table> SUBTOTAL (2) (\$) [0]							Extra Claims	Fee from Below	Fee Paid	Total Claims	<input type="checkbox"/> - 20** =	<input type="checkbox"/> x	<input type="checkbox"/> = <input type="checkbox"/>	Independent Claims	<input type="checkbox"/> - 3** =	<input type="checkbox"/> x	<input type="checkbox"/> = <input type="checkbox"/>	Multiple Dependent		<input type="checkbox"/> = <input type="checkbox"/>		Code (\$)	Fee Description	1202	18 Claims in excess of 20	1201	84 Independent claims in excess of 3	1203	280 Multiple dependent claim, if not paid	1204	84 **Reissue independent claims over original patent	1205	18 **Reissue claims in excess of 20 & over original patent																																																																				
	Extra Claims	Fee from Below	Fee Paid																																																																																																		
Total Claims	<input type="checkbox"/> - 20** =	<input type="checkbox"/> x	<input type="checkbox"/> = <input type="checkbox"/>																																																																																																		
Independent Claims	<input type="checkbox"/> - 3** =	<input type="checkbox"/> x	<input type="checkbox"/> = <input type="checkbox"/>																																																																																																		
Multiple Dependent		<input type="checkbox"/> = <input type="checkbox"/>																																																																																																			
Code (\$)	Fee Description																																																																																																				
1202	18 Claims in excess of 20																																																																																																				
1201	84 Independent claims in excess of 3																																																																																																				
1203	280 Multiple dependent claim, if not paid																																																																																																				
1204	84 **Reissue independent claims over original patent																																																																																																				
1205	18 **Reissue claims in excess of 20 & over original patent																																																																																																				

SUBMITTED BY

Name (Print/Type)	Richard L. Alexander	Registration No.	52,463	Complete (if applicable)
Signature				Telephone (513) 622-1268
Date	June 16, 2003			

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P. O. Box 1430, Alexandria, VA 22313-1430.